

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>1-7-02</u>		2 Serial/Patent # <u>09/958,980</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
122	Petition	4	12-19-01	\$ 150-							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 130-							
		8 TO BE REFUNDED BY:									
10 REASON:		<input type="checkbox"/> Treasury Check									
<input type="checkbox"/> Overpayment	<input checked="" type="checkbox"/> Credit Deposit A/C #:										
<input type="checkbox"/> Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td>1</td><td>9</td><td>--</td><td>0</td><td>7</td><td>3</td><td>3</td> </tr> </table>				1	9	--	0	7	3	3
1	9	--	0	7	3	3					
<input checked="" type="checkbox"/> No Fee Due (Explanation):	<u>PET. DUE TO PTO ERROR</u>										
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>D. WOOD</u>		TITLE: <u>PET ATTY</u>									
SIGNATURE: <u>[Signature]</u>		PHONE: <u>306-6918</u>									
OFFICE: <u>PETITIONS</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>		DATE: <u>2-27-02</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**